

## Refine Search

Your wildcard search against 10000 terms has yielded the results below.

***Your result set for the last L# is incomplete.***

The probable cause is use of unlimited truncation. Revise your search strategy to use limited truncation.

### Search Results -

Terms	Documents
employ\$ near20 contribut\$ near20 health near20 insurance	24

Database:

US Pre-Grant Publication Full-Text Database  
US Patents Full-Text Database  
US OCR Full-Text Database  
EPO Abstracts Database  
JPO Abstracts Database  
Derwent World Patents Index  
IBM Technical Disclosure Bulletins

Search:

L2

Refine Search

Recall Text

Clear

Interrupt

### Search History

DATE: Friday, March 03, 2006   [Printable Copy](#)   [Create Case](#)

#### Set Name Query

side by side

#### Hit Count Set Name

result set

DB=PGPB,USPT,USOC,EPAB,JPAB,DWPI,TDBD; PLUR=YES; OP=ADJ

<u>L2</u>	employ\$ near20 contribut\$ near20 health near20 insurance	24	<u>L2</u>
<u>L1</u>	employ\$ near20 contrinut\$ near20 health near20 insurance	0	<u>L1</u>

END OF SEARCH HISTORY

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L2: Entry 23 of 24

File: USPT

Aug 4, 1992

DOCUMENT-IDENTIFIER: US 5136502 A

**\*\* See image for Certificate of Correction \*\***

TITLE: System for funding, analyzing and managing health care liabilities

CLAIMS:

1. A retiree group health care benefits computer system, that administers said group health care benefits for at least one employer, on behalf of a plurality of employees of said at least one employer, who are to receive payments for their health care, said computer system comprising:

accounting means for providing accounting evaluations of said health care benefits system;

a VEBA trust administering means, including:

employer contribution limit determining means for analyzing and computing said at least one employer's qualified asset account limit contribution to said VEBA trust, wherein said qualified asset account limit includes a qualified direct cost which is the aggregate amount that is allowable as a deduction if said health care benefits are paid on a current basis, a qualified asset account amount which involves the annual additions to be set aside for future medical payments that are incurred but are unpaid including claims incurred but not reported and claims reported but not paid, and an after-tax income of said VEBA trust;

selecting means for selecting certain individuals from said plurality of employees and for determining a policy value for each of a plurality of life insurance policies covering the lives of said selected certain individuals in order to fund a pooled liability of said group health care benefits of said plurality of employees, wherein total premium costs for said plurality of life insurance policies do not substantially exceed said qualified asset account limit contribution;

purchasing means for procuring said plurality of life insurance policies;

collecting means for collecting death benefit proceeds of said purchased plurality of life insurance policies; and

paying means for paying said group health care benefits for said plurality of employees incurring health care costs from said collected death benefit proceeds from said individual life insurance policies for said certain individuals; and

investment means for investing premiums of said procured life insurance policies in at least one of a plurality of investment vehicles, said investment vehicles being manages from within a life insurance company and/or from outside said life insurance company, in order that said at least one investment vehicle produces sufficient cash build up to cover said procured life insurance policies

means for updating keyword modules by appending new words at an end of the fixed order of some but not necessarily all of the plurality of language sub-tables and corresponding keyword modules such that when said language conversion means

searches a keyword module in the fixed order, the new words are searched for last and when said language conversion means determines that the input keyword does not exist, the input keyword has not been appended as a new word and the default data is retrieved from the default data module to produce the output language data.

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L2: Entry 17 of 24

File: PGPB

Dec 5, 2002

DOCUMENT-IDENTIFIER: US 20020184148 A1

TITLE: System for web-based payroll and benefits administration

Detail Description Paragraph:

[0136] For each Employer, employer data 40 includes information specific to the Employer, including: address information (for headquarters and other locations), structure information (e.g., departments, divisions), bank information (for bank account(s) from which payroll is funded), paid-time-off policies (e.g., vacation time and sick time payment schedules, including calculation and accrual parameters), holiday information (regarding holidays recognized by one or more of Employer's offices), benefit information (regarding standard and custom health plans, insurance plans, etc.), deduction information (regarding shared and matching contributions by Employer for employee benefits), tax information (regarding tax authorities applicable to Employer's payroll), payroll group information (regarding Employer-defined payroll groups), and pay rate information (regarding Employer-defined pay rates). The Employer typically inputs this information into the system.

Detail Description Paragraph:

[0156] In this embodiment, the system next calculates the employee's pre-tax deductions for the pay period 1030. This calculation step 1030 may include several sub-calculations, such as: (1) calculation of the employee's 401(k) contribution 1035, if applicable; and (2) calculation of the employee's "cafeteria" plan 1036, which may cover insurance premiums, childcare expenses, out-of-pocket medical expenses, etc., if applicable. For example, step 1036 applies where the employee commits to an optional one-year fixed deduction to fund a pre-tax medical plan, which the Employer can match in a "medical savings account cafeteria" plan. Where applicable, and as a part of step 1036, the system can decide how much of the employee's contribution goes to the pre-tax cafeteria plan and how much goes to a non-deductible health insurance plan. Step 1030 requires use of employee benefits information 1032 (included in benefits data 60), such as amounts to be deducted from the employee's paycheck. Step 1030 may also require the step of applying rules 1020 from rules database 120, such as legal compliance rules 120e to ensure that the employee does not make 401(k) contributions above the annual limit, which has tax implications. In such a situation, the system can limit the employee's annual deduction or transfer the excess deduction to another deduction. Further, after determining the employee's pre-tax calculations, the system may need to calculate the Employer's matching contribution to the employee's 401(k) plan 1040, if the Employer provides such a matching benefit.

Detail Description Paragraph:

[0392] The "Deducted YTD" interface, illustrated in FIG. 37, displays year-to-date tax deductions of the selected employee broken out by month and by type, for example, federal income tax, California income tax, FICA, Medicare, California disability tax, 401(k) contribution, pre-tax health insurance payments, etc. The user can refresh the information displayed on this interface by clicking "Refresh" button 4395.

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L2: Entry 22 of 24

File: USPT

Aug 22, 2000

DOCUMENT-IDENTIFIER: US 6108641 A

TITLE: Integrated nested account financial system with medical savings subaccount

Detailed Description Text (31):

Referring now to FIG. 9A, a periodic account maintenance routine is described. This routine may be run daily, monthly, or at any other appropriate interval. Proceeding from block 900, processing begins by identifying at block 905 an account to service, designated by the index number (I). At block 910, the identified account file is accessed from the database. Processing continues through a series of events which must occur periodically in each account. For example, at test 915 it is decided if a contribution is due to the subscriber's MSA from an employer. This is accomplished by checking the previously established parameters in the subscriber's account, such as whether this is a corporate sponsored account, and the parameters PERIOD(I) and employer funding percent (%). If no contribution is due, processing follows the "NO" path to the next test 940. If a contribution is determined to be due, a sub-process starting at block 920 is executed. In block 920 the amount of the periodic contribution, DEP(I), is calculated. This calculation figures the funds needed in the MSA and for the health insurance premiums for the remainder of the year and divides this amount over the number of remaining cycles in the year, then prorates that amount by the employer's contribution.

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